

**FILED**  
JEANNE A. NAUGHTON, CLERK

MAY 31 2023

U.S. BANKRUPTCY COURT  
CAMDEN, N.J.  
BY (Signature) DEPUTY

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

Case No.:

22-19361

Chapter:

13

Adv. No.:

Hearing Date:

05/18/2023

Judge:

KAPLAN

In Re:

BLOCK Fi

UNITED STATES  
BANKRUPTCY COURT

**CERTIFICATION OF SERVICE**

1. I, Paul Aquino :

☐ represent \_\_\_\_\_ in this matter.

☐ am the secretary/paralegal for \_\_\_\_\_, who represents  
\_\_\_\_\_ in this matter.

☒ am the Claimant in this case and am representing myself.

2. On 05/20/2023, I sent a copy of the following pleadings and/or documents  
to the parties listed in the chart below.

JUDGE KAPLAN

3. I certify under penalty of perjury that the above documents were sent using the mode of service  
indicated.

Date: 05/20/2023

Paul Anthony Aquino  
Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
U.S. BANKRUPTCY COURT P.O. BOX 2067 CAMDEN, NJ 08101	JUDGE KAPLAN	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

NAME OF DEBTOR		CASE NUMBER	
NAME AND ADDRESS OF CLAIMANT (AND NAME AND ADDRESS OF ATTORNEY, IF ANY)		AMOUNT OF CLAIMS FILED AND ALLOWED	REMARKS
MULTIPLE DEPTORS ASSERTED / BLOCKFi Inc		22-19361	
CLAIM NO.	PAUL AQUINO 21 SOLEDAD ST. #320 SALINAS, CA 93901	FILED GENERAL UNSECURED	REQUESTING A TRUST IN MY NAME - PAUL ANTHONY AQUINO -
DATE FILED		\$ 8,819,999,000,000.00 ALLOWED ASSERTED	
CLAIM NO.	PAUL AQUINO 21 SOLEDAD ST. #320 SALINAS, CA 93901	FILED PRIORITY	REQUESTING ACH DEPOSIT TO RT: 026014928 ACT: 2536722627299
DATE FILED		\$ 1,000,000.00 ALLOWED ASSERTED	
CLAIM NO.	PAUL AQUINO 21 SOLEDAD ST. #320 SALINAS, CA 93901	FILED SECURED	REQUESTING A TRUST IN CHILDREN NAMES - 1. ANTHONY AQUINO 2. ZARIAH AQUINO 3. ALEXANDER AQUINO
DATE FILED		\$ 980,000,000,000.00 ALLOWED	
CLAIM NO.	PAUL AQUINO 21 SOLEDAD ST. #320 SALINAS, CA 93901	FILED PRIORITY	DONATION OF \$ 1.43
DATE FILED		\$ 1.43 ALLOWED	
CLAIM NO.		FILED	
DATE FILED		\$ ALLOWED	
CLAIM NO.		FILED	
DATE FILED		\$ ALLOWED	
CLAIM NO.		FILED	
DATE FILED		\$ ALLOWED	
CLAIM NO.		FILED	
DATE FILED		\$ ALLOWED	



Creditor Data Detail - Claim # 28867

Creditor

Name on file  
Address on file

Debtor Name

Multiple Debtors Asserted

Date Filed

04/11/2023

Claim Number

28867

Schedule Number

n/a

Claim Amounts

Claim Nature	General Unsecured
Schedule Amount	
C*	
U*	
D*	
Asserted Claim Amount	\$8,819,999,000,000.00
C*	
U*	
F*	
Current	\$8,819,999,000,000.00
Claim Value	
Claim Status	Asserted
Claim Nature	Priority
Schedule Amount	
C*	
U*	
D*	
Asserted Claim Amount	\$1,000,000.00
C*	
U*	
F*	
Current	\$1,000,000.00
Claim Value	
Claim Status	Asserted
Claim Nature	Secured
Schedule Amount	
C*	
U*	
D*	
Asserted Claim Amount	\$980,000,000,000.00
C*	
U*	
U*	
Current	\$980,000,000,000.00

X

PRIME CLERK IS NOW KROLL RESTRUCTURING ADMINISTRATION. ALL PRIME CLERK URLS AND EMAIL ADDRESSES ARE AUTOMATICALLY REDIRECTED.

KROLL

Creditor Information - Schedule # 4228867

Creditor

Name on file  
Address on file

Debtor Name

BlockFi Inc.

Date Filed

n/a

Claim Number

n/a

Schedule Number

4228867

Claim Amounts

Claim Nature	Schedule Amount	C*U*D*	Asserted Claim Amount	C*U*F*	Current Claim Value	Claim Status
General Unsecured	\$1.43				\$1.43	Scheduled
Priority						
Total	\$1.43				\$1.43	

\*C=Contingent, U=Unliquidated, D=Disputed, F=Foreign

Claim Nature	Schedule Amount	C*U*D*	Asserted Claim Amount	C*U*F*	Current Claim Value	Claim Status
Secured						
503(b)(9) Admin Priority						
Admin Priority						
<b>Total</b>	<b>\$1.43</b>				<b>\$1.43</b>	

\*C=Contingent, U=Unliquidated, D=Disputed, F=Foreign

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UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY

SAN JOSE CA 950

22 MAY 2023 PM 4 L

MAY 30 2023

AT 8:30 M  
CLERK, U.S. DISTRICT COURT - DNJ



U.S. A  
40.00  
LEGAL FEE  
PROPERLY OK

PAUL AQUINO  
21 SOLEDAD ST. #320  
MALIBU, CA 93901

U.S. POSTAL OFFICE  
AND COURTHOUSE  
401 MARKET STREET  
CAMDEN, NJ 08101